



Republic of South Sudan
Ministry of Interior
Directorate of Nationality, Passports and Immigration



Visa Application Form
Form 5A
(FILL OUT IN CAPITAL LETTERS ONLY)

AV-

Warning: giving false information is considered a crime in accordance with the Passport and Immigration Act, 2011. Visa fee is non-refundable. Visa is not transferable and attempt to do so is considered a crime.

Place of Application..... Date:/...../20.....

Have you Previously Applied for South Sudan Visa. Yes No

If yes, Previous visa No: Date of Issue:.....

Place of Issue:.....Date of Arrival in South Sudan:.....

Point of Entry:.....Point of Exit:.....

1. **Visa Type Requested:** Single: Multiple: Transit: Other: (Specify).....

Purpose of visit: Visit Education Tourism Medical treatment Official Other (Specify).....

Duration of Intended Stay.....Date of Intended Arrival in South Sudan.....

Mode of Transport: Air Road/Trail River

2. Personal Details (As in Passport)

Surname:

Given Names:

Date of Birth (Day/Month/Year):/...../.....

Place of Birth:Country of Birth:.....

Sex: Male Female

Marital Status: Single Married Divorced Widowed

Nationality / Citizenship:

.....
(If dual, give both)

3. Passport Details:

Passport Type: Regular Diplomatic Special Business Other (specify)

Passport No: Date of Issue (Day/Month/Year):/...../.....

Country of Issue: Date of Expiry (Day/Month/Year):/...../.....

Place of Issue:

4. Professional / Occupation Details:

Present Occupation: Title:

Employer Name:

Employer Address:

.....

..... Phone No:

E-mail:

5. Applicant's Contact Details:

Present Address:

.....
.....
.....

Permanent Country of Origin Address:

.....
.....

Phone No: Mobile No.:

E-mail Address:

6. Family Details:

Spouse Details

Surname:

Given Names:

Permanent Address:

.....
.....

Phone No: Mobile No.:

E-mail Address:

Next of Kin Details

Surname:

Given Names:

Permanent Address:

.....
.....

Phone No: Mobile No:.....

E-mail Address:

7. Have you ever:

- a) Been convicted of a crime or offence in any country? Yes No
- b) Been deported or removed from South Sudan or any country for overstaying your visa or violating any law or regulation? Yes No
- c) Been convicted and sentenced for a drug offence in any country in violation of law concerning narcotics, marijuana, opium, stimulants or psychotropic substances? Yes No
- d) Committed trafficking in persons or incited or aided another to commit such an offence? Yes No
- e) Are you suffering from tuberculosis, any other infectious or contagious disease Yes No

If you answer yes to any of the questions above, provide explanation below:

.....
.....

Address of Place of Stay / Hotel:

.....
.....

Funds Available For My Stay

8. Guarantor or references in South Sudan:

Name: Telephone No.:

Address:

Date of Birth (Day/Month/Year) :/...../..... Sex: Male Female

Relationship to Applicant:

Profession or occupation and position:

Nationality and Immigration Status:

9. Declaration:

I declare that the information provided in this form is true and accurate.

Signature of the applicant (Sign below here)

Date (Write below here)

.....

:/...../.....

FOR OFFICIAL USE

Approving Authority:

Officer Name: Title:

Entry Type: Single Multiple Period of stay

Officer's Signature: Date (Day/Month/Year):/...../.....

Comments:

.....

Fees

Amount:

Date of Receipt: Receipt No:

Designated Officer's Name: Title:

Signature and stamp:

Visa Number: